

USEPA
290 BROADWAY
NY, NY

NOTIFICATION OF DEMOLITION AND RENOVATION
PAL JOB # 15-1579

| Operator Project # | Postmark | Date Received | Notification # |
|--|----------------------------|---|-------------------------------------|
| TYPE OF NOTIFICATION (O-Original, R-Received, C-Cancelled): O – Original | | | |
| FACILITY INFORMATION (Identify Owner, Removal Contractor and Other Operator): | | | |
| OWNER NAME: SL Green Realty Corp | | | |
| Address: 420 Lexington Avenue | | | |
| City: New York | | State: NY | Zip: 10170 |
| Contact Name: Roger Merriman | | Telephone: 212-216-1664 | |
| REMOVAL CONTRACTOR: PAL Environmental Safety Corp. d/b/a PAL Environmental Services | | | |
| Address: 11-02 Queens Plaza South | | | |
| City: Long Island City | | State: NY | Zip: 11101 |
| Contact Name: Aric Domozyk | | Telephone: 718-349-0900 | |
| OTHER CONTRACTOR: | | | |
| Address: | | | |
| City: | | State: | Zip: |
| Contact Name: | | Telephone: | |
| TYPE OF OPERATION (D-Demo, O-Ordered Demo, R-Renovation, E-Emergency Renovation): R | | | |
| IS ASBESTOS PRESENT? (YES NO) YES | | | |
| FACILITY DESCRIPTION (Include Building Name, Number and Floor or Room Number) | | | |
| Building Name: | | | |
| Address: 919 3rd Avenue | | | |
| City: New York | | State: NY | Zip: 10022 |
| Site Location: 2nd, 14th, 15th, 16th 17th & 18th Floor | | | |
| Building Size: 1,323,432 SF | | # of Floors: 46 | Age in Years: 46 |
| Present Use: Commercial | | Prior Use: Commercial | |
| Procedure, Including Analytical Method, If Appropriate, Used to Detect the Presence of Asbestos Material: PLM – Polarized Light Microscopy | | | |
| Approximate amount of asbestos , Including 1. Regulated ACM to be removed 2. Category I ACM not removed 3. Category II ACM not removed | R. ACM to be removed | Non-Friable Asbestos Material not to be removed | |
| | | CAT I | CAT II |
| | | | UNIT |
| | | | Linear Feet: Ln M: |
| Surface Area: Joint Compound | 3,236 | | Square Feet: X Square Meter: |
| Volume RACM off Facility Component | | | CuFt: Cu M: |
| Scheduled Dates Asbestos Removal (mm/dd./yy) | | Start: 05/05/2016 | Complete: 05/01/2017 |
| Scheduled Dates Demo/Renovation (mm/dd./yy) | | Start: | Complete: |
| | | | |

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|---|-------------------------|---------------------------------|
| DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD (S) TO BE USED: | | |
| DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: HEPA Vacs, Micro Traps (Negative Air Pressure) and amended water will be utilized for emissions control. | | |
| WASTE TRANSPORTER #1 | | |
| Name: Tri State Transfer Associates | | |
| Address: 1199 Randall Avenue | | |
| City: Long Island City | State: NY | Zip: 10474 |
| Contact Name: Jimmy Byrne | Telephone: 718-617-0771 | |
| WASTE TRANSPORTER #2 | | |
| Name: ATC | | |
| Address: 2 Moriches Middle Island Road | | |
| City: Shirley | State: NY | Zip: |
| Contact Name: Kenny Smith | Telephone: 631-924-5050 | |
| WASTE TRANSPORTER #3 | | |
| Name: P.A.L. Environmental Safety Corp. d/b/a PAL Environmental Services | | |
| Location: 11-02 Queens Plaza South | | |
| City: Long Island City | City: Long Island City | City: Long Island City |
| Telephone: 718-349-0900 | | |
| Disposal Facility | | |
| Name: Minerva Enterprises | | |
| Location: 9000 Minerva Road, SE | | Location: 9000 Minerva Road, SE |
| City: Waynesburg | State: OH | Zip: 44688 |
| FOR EMERGENCY RENOVATIONS | | |
| Date and Hour of Emergency (mm/dd./yy) | | |
| Description of the Sudden, Unexpected Event: | | |
| Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden: | | |
| DESCRIPTION OF PROCEDURE TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED OR REDUCED TO POWDER. Any ACM, which is discovered unexpectedly, or non-friable ACM, which becomes crumbled, will be immediately wet with amended water and cleaned up with HEPA Vacs, to be put in 6 mil poly bags for proper disposal. | | |
| I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFT PART 61, SUBPART M), WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS (required 1 year after promulgation) | | |
|  Signature of Owner/Operator | | 04/20/2016 Date |
| I certify that the above information is correct | | |
| Signature of Owner/Operator | | 04/20/2016 Date |